FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1		HGANIZA	_	N							
		(See instruction	is)					Office	use only		
NAME OF COMMITTEE (in	full)	(Check if name is changed)		nple: If typyin the lines	g, type	12FE	4M5				
OHIO REPUB	LICAN PARTY ST	ATE CENTRAL &	EXEC	TIVE CO	MITTEE						ш
							ш	ш		ш	
ADDRESS (number and	street) 211 \$	S. Fifth Street	ш				ш	ш		ш	
(Check if add	ress						ш	ш		ш	
is changed)	Colu	mbus	шш	шш	ш	OH			43215	-	
			CITY			STATE	•		ZIP C	ODE 📥	
COMMITTEE'S E-MA											
							ш	ш			
							ш	ш		ــــــــــــــــــــــــــــــــــــــ	
COMMITTEE'S WEE	PAGE ADDRESS (U	RL)									
	111111				1 1 1 1	1 1	шШ		1 1		
COMMITTEE'S FAX 6142281093	NUMBER										
2. DATE M 0 .	M / D D / Y	2 0 0 9 Y									
3. FEC IDENTIFIC	ATION NUMBER	(C C00	162339							
4. IS THIS STATE	MENT NEW	(N) OR	X	AMENI	DED (A)						
I certify that I have exam	nined this Statement and	to the best of my know	wledge and	d belief it is tru	ue, correct an	d comple	te				
Type or Print Name of	Treasurer	/Ir. & Mrs. Paul H	loag								
Signature of Treasure	r Electronically File	d by Mr. & Mrs.	Paul H	oag		Date	0 1	/	23	Y Y	2 0 [°] 0 9 [°]
NOTE: Submission of fa	alse, erroneous, or incon	nplete information may							2 U.S.C. S	3437g.	
Office				For further in	nformation o	ontact:					
Use Only				Federal Elect Toll Free 800 Local 202-69	ion Commiss -424-9530				EC FC Revised 1		1

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5.		COMMITTEE (Check One) te Committee:	
	(a)	This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete information below.)	the candidate
	Name of Candidate	e	
	Candidate Party Affil		State District
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	e	
	Party Co		
	(d)	This committee is a STA (National, State (or subordinate) committee of the REP	(Democratic, Republican,etc.) Party.
	Political	Action Committee (PAC):	
	(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:
		Corporation Corporation w/o Capital Stock La	abor Organization
		Membership Organization Trade Association C	ooperative
	(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	ed fund or party
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
	Joint Fun	ndraising Representative:	
	(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
	(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	С	committees Participating in Joint Fundraiser	
		1. FEC ID number C	
		2 FEC ID number C	
		3. FEC ID number	
		4. FEC ID number	
		5 FEC ID number C	

	FFC Form 1 /Devices	N 10/0007\		Dogo 2
Write o	FEC Form 1 (Revised or Type Committee Nam	<u>'</u>		Page 3
		PARTY STATE CENTRAL & EXECUTIV	E COMMITTEE	
6. Na r	me of Any Connected	Organization, Affiliated Committee, Leaders	hip PAC Sponsor or Joint Fundra	aising Representative
REI	PUBLICAN FINANC	E COMMITTEE OF HAMILTON COUNT	Γ Υ	
<u> </u>		700 Walnut Street Suit		
Mai	iling Address	700 Wallat Street Sait		
		Cincinnati Cincinnati	OH OH	45202
		CITY▲	STATE ≜	ZIP CODE
Rel	ationship:			
	Connected Organizati	on X Affiliated Committee Le	eadership PAC Sponsor Jo	int Fundraising Representative
pos	ssession of Committ	Identify by name, address, (phone numbee books and records.		the person in
Mai	iling Address	% Ohio Republican Pa	rty	
		211 S. Fifth Street		
		Columbus	OH	43215
Title	e or Position ♥	CITY A	STATE &	ZIP CODE A
	Executi	ve Director	Telephone number614	
na		ne and address (phone number optionany designated agent (e.g., assistant trea		mittee; and the
	Treasurer Mr.	& Mrs. Paul Hoag		
Ма	ulling Address	8301 Pilliod Road		
		Holland		43528
Titl	le or Position ♥	CITY A	STATE ▲	ZIP CODE A

614

Telephone number

228

2481

Treasurer

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	Full Name of Designated Agent			
	Mailing Address			
	Title or Position ▼	CITY A	STATE A	ZIP CODE A
		То	elephone number	
9.	Banks or Other Depositori safety deposit boxes or main		e committee deposits funds, ho	lds accounts, rents
	Name of Bank, Depository, e			
	Chai i	n Bridge Bank		
	Mailing Address			
		McLean	L VA	22101 _ [
		CITY 🗻	STATE △	ZIP CODE 🛕
	Name of Bank, Depository, e	etc.		
	Fifth	Third Bank		
	Mailing Address	21 East State Street		
		Columbus	OH [43215
		CITY 🗖	STATE▲	ZIP CODE 🛕

Banks or Other Depositorions safety deposit boxes or maint		nmittee deposits funds, hold	s accounts, rents
Name of Bank, Depository, et		[ADDITIONAL]
Mailing Address			
		1 1 1 1 1 1 1 1 1	
	CITY 🗖	STATE ⊿	ZIP CODE 🛕
	CIT Z	SIAILA	
Name of Any Connected O	rganization, Affiliated Committee, Leadership PAC Sp	onsor or Joint Fundraisin	[ADDITIONAL a Representative
STARK COUNTY REPL		onsor or count i undialism	g riepresentative
STARK COUNTY REPO	PALICAN PARTT		
Mailing Address	2727 Fulton Drive NW		
	Canton	OH	44718
	CITY▲	STATE A	ZIP CODE A
lationship: Connected Organization	X Affiliated Committee Leadership PAC S	ponsor Joint Fundi	aising Representative
			[ADDITIONAL]
Designated Agent			-
Full Name			
Mailing Address			
Title or Position ▼	CITY A	STATE ▲	ZIP CODE A
	Tele	ephone number	
Joint Fundraiser Participar		ephone number	 [ADDITIONAL]

Banks or Other Depositories: safety deposit boxes or maintain	List all banks or other depositories in which the committees funds	ee deposits funds, ho	lds accounts, rents
Name of Bank, Depository, etc.	J. G.		[ADDITIONAL]
Mailing Address			
	L		
	CITY 🛕	STATE ⊿	ZIP CODE 🛕
	nnization, Affiliated Committee, Leadership PAC Sponso	or or Joint Fundrais	[ADDITIONAL sing Representative
MCCAIN VICTORY OHIO	(MVO)		
Mailing Address	228 S WASHINGTON ST STE 115		
	1		
	ALEXANDRIA	VA	22314
	CITY▲	STATE A	ZIP CODE
lationship: Connected Organization	Affiliated Committee Leadership PAC Sponso	or X Joint Fun	draising Representative
Designated Agent			[ADDITIONAL]
Full Name			
Mailing Address			
Title or Position ▼	CITY A	STATE▲	ZIP CODE A
	Telephon	e number	
Joint Fundraiser Participant			[ADDITIONAL]
	FEC	ID number C	

Banks or Other Depositories: safety deposit boxes or maintains	List all banks or other depositories in which the committee of funds	deposits funds, ho	lds accounts, rents
Name of Bank, Depository, etc.	s rando.		[ADDITIONAL]
Mailing Address			
[
	CITY 🛕	STATE ⊿	ZIP CODE 🛕
Name of Any Connected Orga	nization, Affiliated Committee, Leadership PAC Sponsor o	or Joint Fundrais	[ADDITIONAL] sing Representative
1			
	228 S WASHINGTON ST STE 115		
Mailing Address			
	ALEXANDRIA	VA	22314
2 dell'esseller	CITY▲	STATE A	ZIP CODE 🛦
Relationship: Connected Organization	Affiliated Committee Leadership PAC Sponsor	X Joint Fur	ndraising Representative
Designated Agent			[ADDITIONAL]
Full Name			
Mailing Address			
Title or Position ♥	CITY A	STATE	ZIP CODE A
	Telephone n	umber	
Joint Fundraiser Participant			[ADDITIONAL]
		number	

Banks or Other Depositorie safety deposit boxes or mainta		sommittee deposits rands, note	•
Name of Bank, Depository, etc		ļ	[ADDITIONAL]
Mailing Address		<u> </u>	
	CITY 🛕	STATE 4	ZIP CODE 🛕
			[ADDITIONAL
	rganization, Affiliated Committee, Leadership PAC	Sponsor or Joint Fundraisi	ng Representative
MCCAIN-PALIN VICTOR	RY 2008		
			<u> </u>
Martin and Addison	228 S. Washington Street		
Mailing Address	Suite 115		
	Alexandria		22314
ationship:	CITY	STATE ≜	ZIP CODE
Connected Organization	Affiliated Committee Leadership PAG	C Sponsor X Joint Fund	Iraising Representative
			[ADDITIONAL]
Designated Agent			-
Pull Name			
•			
Full Name	CITY	STATE &	ZIP CODE A
Full Name Mailing Address			
Full Name		STATE &	